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26194 7590 01/02/2009

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FISH & RICHARDSON P.C.

P.O. Box 1022 Minneapolis, MN 55440-1022						
APPLICATION NO.	FILING DATE		FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/756,188	01/12/2004		Brian P.		22570-0032001	2296
TITLE OF INVENTION; THERAPEUTIC DEVICE AND METHOD USING FEEDBACK FROM IMPLANTABLE SENSOR DEVICE						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755		\$0	\$755	04/02/2009
EXAMINER		ART UNIT		CLASS-SUBCLASS	1	
SCHAETZLE, KENNEDY		3766		607-006000	ı	
Change of correspondence address or indication of "Fee Address" (37 CFR L363) [] Change of correspondence address (or Change of Correspondence Address form PTOSB1/22) attached. [] Tree Address' indication (or "Fee Address' Indication form PTOSB4/7, Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents CR, alternitively, (2) the name of a single farm (thowing as a member a registered attorney or agents. If no name is listed, no name will be printed. 3.			
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Please check the appropriate assignee category or categories (will not be printed on the patent): [] individual [X] corporation or other private group entity [] government						
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(Authorized Signature) /Kurt F. Krenz/				(Date) March 26, 2009		
Typed or Printed Name Kurt F. Krenz				Registration No.	62,664	
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